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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/711,591	09/27/2004	Michael Burr	2006579-0272 (CTX-093DV)	5590	
	7590	2008 EXAMINER CITRIX SYSTEMS, INC.		IINER	
TWO INTERN	TWO INTERNATIONAL PLACE			NICKERSON, JEFFREY L	
BOSTON, MA	02110		ART UNIT	PAPER NUMBER	
			2142		
			MAIL DATE	DELIVERY MODE	
			07/17/2008	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonsious Summons	10/711,591	BURR ET AL.	
Interview Summary	Examiner	Art Unit	
	JEFFREY NICKERSON	2142	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>JEFFREY NICKERSON</u> .	(3)		
(2) <u>Kellan Ponikiewicz (59701)</u> .	(4)		
Date of Interview: 14 July 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2) <mark> applicant's representative</mark>	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>1,10 and 11</u> .			
Identification of prior art discussed: <u>None</u> .			
Agreement with respect to the claims f)⊠ was reached. g	ı)	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Examiner Nickerson suggoutstanding 112 1<sup>st</sup> and 2<sup>nd</sup> paragraph rejections. Applicant asked if making claim 11 dependent on claim 10 would over agreed it would.</u>	gested changing the preamble at's representative agreed. Ap ercome double patenting warn	e of claim 1 to ov plicant's represe ing. Examiner N	<u>ercome</u> <u>ntative</u> lickerson
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no c allowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
	/Andrew Caldwell/ Superviso	ry Patent Exr.	
	Examiner's signature, if requi	<u> </u>	

Application No.

Applicant(s)